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S.D. SEC. OF STATE

Secretary of State Office 500 E Capitol Ave Pierre, SD 57501 (605)773-2797

## APPLICATION FOR CERTIFICATE OF AUTHORIZATION TO PROVIDE POSTSECONDARY EDUCATION

Ple	ase mark the appro	priate box:						
	<ul><li>☒ INITIAL APPLICATION</li><li>☐ CHANGE OF NAME</li></ul>			CHANGE OF PRIM	MARY ADDRES	SS		
				CHANGE IN ADDITIONAL SITES (ATTACHMENT A)				
	☐ CHANGE	IN ACCREDITATION		OTHER CHANGE	(S)			
۱.	Name of Applicant (the institutional name under which postsecondary educational programs are provided): Arizona State University							
2.	1475 North S	ddress ( <i>Additional sites listed on</i> cottsdale Road	chment A):					
	(Street Address)			AZ		85257-3538		
	Scottsdale							
	(City)			(State)		(ZIP Code)		
	asuonline.asu.edu							
	(Website)							
,	Contact Person:	Patricia Feldman, Ed.D.			Associate	Vice Provost		
).		(Name)			(Title)			
		(480) 884-1543			(480) 884-1526			
	(Telephone Number)		(Fax N		(Fax Number)	Number)		
		feldman@asu.edu						
		(Email Address)						
<b>J</b> .	Does the Applicant	operate at other sites than the a	ıddre	ss stated above?	☐ YES	⊠ NO		

If "YES", please be advised that Attachment A to this Application must be completed, which shall comprise part of this Application, and any subsequent changes to the information provided in Attachment A must be submitted with a revised Application to the Secretary of State Office, within thirty (30) days of such change.

5.	Does the Applicant have a parent organization	n (non-profit, corporate, or otherwise)	P 🗆 YES 💆 NO				
	If "YES", please indicate the following:						
	(Parent Organization Name)	<u>v</u>					
	(Street Address)						
	(City)	(State)	(ZIP Code)				
6.	Is the Applicant an instrumentality of the State	e under the jurisdiction of the South Da	akota Board of Regents?				
	☐ YES ☒ NO If "NO", please indicate whether t	he Applicant is either ( <i>check one of th</i>	e following):				
	An instrumentality of another solutions Arizona	state (please list the state agency which Agency Arizona E	ch has jurisdiction over Applicant) Board of Regents				
	Address 2020 North Central Avenue, Suite 230						
	<sub>City</sub> Phoenix	State AZ	Zip Code 85004-4593				
	Contact Phone Number (602) 229-2500						
	Contact Website peggy.martin@azregents.edu						
	Legally established to operate in South Dakota as a private business entity						
	South Dakota Corporate	ID					
	South Dakota Corporate	Name					
	☐ Legally established to operate in South Dakota as a not-for-profit corporation.						
	South Dakota Corporate	ID	·				
	South Dakota Corporate	Name					
7.	Is the Applicant accredited by an accrediting a	agency recognized by the United State	s Department of Education?				
	🛚 YES						
	Accrediting Agency: Higher Learning Commission						
	230 South LaSalle Street, Suite 7-500						
	(Street Address)	••	00004.444				
	Chicago	IL (State)	60604-1411 (ZIP Code)				
	(City)	(State)	(ZIP Code)				

Effe	ctive date of most recent grant of accreditation	on: 2013		
Terr	m or expiration date of most recent accredital	ion: 2023		
□ №	make another postsecondary institution,	ntation of an affiliation agreement whose terms is accredited by an accrediting agency recognized i, responsible for awarding academic credit and intaining transcripts for such students:		
change in informatio other accompanying	n set forth in this Application, including any c	y the Secretary of State Office within thirty (30) days of a nanges in information set forth in any Attachments or the foregoing document and, under penalties of perjury, of, is true and correct.		
The application must	t be signed by an authorized officer of the po	stsecondary educational institution:		
Dated <u>8 b</u>	· 13 (Signature of an	authorized officer)		
	` •	Feldman, Ed.D.		
	(Printed name)			
	Associate V	ice Provost		

## **Submit Application to:**

(Title)

South Dakota Secretary of State Corporations Division 500 East Capitol, Suite 204 Pierre, SD 57501

Or email us at: SOS.EDU@state.sd.us

## **Exemptions**

If the institution falls under one or more of the following categories, the institution is exempt from registering.

- Established by the government of the United States;
- Established by the government of an Indian tribe whose tribal lands are located, in whole or in part, in South Dakota;
- Established, owned, controlled, operated, and maintained by a religious organization lawfully operating as a nonprofit religious corporation and awarding only religious degrees or certificates for the purpose of conferring clerical status or authority within that religion; or
- Subject to the jurisdiction and regulations to the South Dakota Cosmetology Commission.